MENTAL HEALTH IN RELATION TO EXISTENTIAL THINKING AND MEANING IN LIFE AMONG ADOLESCENTS

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INTRODUCTION

The aim of present study is to explore, if there exists, some correlation between existential thinking, meaning in life and mental health scores of target population i.e., college students. It would also explore gender difference in mental health, existential thinking and meaning in life among college students. We know that mental health refers to cognitive, behavioural and emotional well-being. It is all about how people think, feel and behave. The status of mental health in adolescents has not been explored sufficiently in terms of their tendency to explore the fundamental concerns of human existence and the capacity to engage in a meaning making process. We are also not much aware about the mental health status in relation to existential thinking among different gender adolescents. However, a significant amount of research has been done in mental health and it's correlates but there is a need to explore mental health in relation to existential thinking and thereby meaning in life.

The issue of stress is adolescents is an important health issue as early teen years are marked by rapid changes-physical, cognitive and emotional. In fact, India has one of the highest rates of suicide among people aged between 15 and 29. Although the reasons are myriad but failure in examination, unemployment and depression are some major reasons. Adolescents in India are also stressed due to globalization and even high access to information and intellectual capacity which makes them vulnerable to a life which can be very fast that results in existential anxiety and increased engagement with existential thinking. Existential thinking as a measure is crucial for adolescents as it was also found to have significance for one's career, educational and personal development by enhancing study strategies, teaching and career selection (Shearer and Allan, 2012). Mental health concerns needs are to be addressed in a holistic way yet there have been very few studies exploring the level of such existential thinking and their relation to mental health.

The statement of the problem is to explore mental health in relation to existential thinking and meaning in life among adolescents.

Mental Health can be defined as person's ability to make positive self-evaluation of oneself, to perceive the reality of what is, to integrate the personality, to be autonomous and independent, to have reasonable group-oriented attitudes and to have environmental mastery.

Meaning in Life is the presence of valued meaning and purpose and yet at the same time openly exploring that meaning or purpose. Presence of Meaning in Life reflects a felt sense that one's life has purpose. It is a subset of meaning in life. Search for Meaning in Life reflects a quest to find meaning in life. It is a subset of meaning in life.

Adolescents can be defined as it is the phase in human growth and development that occurs in between puberty and adulthood. Mental health disorders are estimated at 12% of the total global burden of diseases, yet the awareness, spending and policies to deal with it is highly misappropriate. People of all age in all countries get affect with mental and behavioural disorders. Since it's WHO that focuses on physical, mental and social well-being. Mental health can be defined through many different concepts which include self-efficacy, subjective well-being, competence, autonomy, etc. (WHO, 2001). Existential issues like meaning of life and death have been explored and valued in every culture. Therapeutic benefits of facing

existential issues have been explored by Viktor Frankl, Maslow and Irvin Yalom. Scales for facing existential thinking (SET) is such a measure which has been developed by Shearer and Allan. Since well-being is one of the defining constructs for mental health, existential thinking is an important construct that needs to be explored since the literature on the relationship of existential thinking to mental health does not exist (La Cour & Hvidt, 2010).

It could be quite informative to explore the relationship between existential thinking as meaning making process and mental health. We know that existentialism is a form of philosophical inquiry that explores the problem of human existence and centres on the lived experience of the thinking, feeling, acting individual. Existentialism asserts that people make decisions based on subjective meaning rather than pure rationality. Existential thinking could be an important process to resolve ongoing life crisis and also keep evolving and sustaining a meaning in life. Having meaning or purpose in life can solve the identity crisis that a person normally faces during this period. Purpose can guide life decisions, influence behaviour, shape goals, offer a sense of direction and create meaning. Today's adolescents are facing more problems due to education disparity, materialism, drug/alcohol abuse, single parent households, violence in schools, poverty, desensitization, disrespect, stress, depression and anxiety, sex issues, trust, lack of motivation etc. If we can provide the necessary space to such adolescents to explore the fundamental concerns of their existence at an early age it may result in better adjustment skills which brings them closer to desired levels of mental health.

MODUS OPERANDI

This research is aimed to understand the relationship between mental health in relation to existential thinking and meaning in life among adolescents. The study's paradigm was post-positivism and thus it intended to reach as close to objective truth with hypothesis testing.

HYPOTHESIS

It was hypothesized the there will be significant correlation between the scores of adolescents on Existential Thinking and Mental Health along with all its dimensions. The above was not supported except in case of one dimension of Mental Health i.e. Environmental Mastery which was positively correlated to Existential Thinking. Next it was hypothesized that there will be significant correlation between the scores of adolescents on Mental Health (along with all its dimensions) and Meaning in Life (along with its two subscales). The above was found to be partially correlated with Meaning in life positively correlating with Mental Health and its two dimensions i.e. Perception of Reality and Autonomy. Presence of Meaning in Life was found to be positively correlated to Mental Health and its three dimensions i.e. Perception of Reality, Integration of Personality and Autonomy. Search for Meaning in Life was found to be uncorrelated to Mental Health and its dimensions. Finally, it was hypothesized that there will be no significant difference between male and female adolescents on the variables Mental Health (along with all its dimensions), Existential Thinking and Meaning in Life (along with its two subscales). As per the findings of the study above hypotheses were supported and no significant difference between male and female adolescents was found with its two subscales).

SELECTED VARIABLES

The following variables had been selected for the purpose of the present study.

- 1. Mental Health, including its following dimensions:
 - (a) Positive self-Evaluation (PSE)
 - (b) Perception of Reality (PR)
 - (c) Integration of Personality (IP)
 - (d) Autonomy (AUTNY)
 - (e) Group Oriented Attitudes (GOA)
 - (f) Environmental Mastery (EM)
- 2. Existential Thinking

- 3. Meaning in Life, including its following sub-scales:
 - (a) Presence of Meaning
 - (b) Search for Meaning

PARTICIPANTS

Participants were selected through stratified random sampling. Overall, 120 students filled the questionnaires provided with equal representation of 60 male and 60 female students. A total of 102 students (47 males and 55 females) were finally included in the study after taking into account incomplete or incorrect questionnaires. There was no remuneration provided for participation and the participants were informed that they could abort anytime they wish to. The students were in their late adolescence (17-20 yrs).

SAMPLING TECHNIQUES

Through stratified random sampling technique, a total of 120 undergraduate college students (60 Male and 60 Female) studying in B.A first year were selected as subjects out of which a total of 102 students (47 males and 55 females) were finally included in the study after taking into account incomplete or incorrect questionnaires.

RESEARCH TOOLS

The following tests had been used to collect the data for the study. The detailed description has been given in consecutive sections.

- 1. To measure mental health, the Mental Health Inventory (M.H.I) constructed by Srivastava and Jagdish (1983) was administered.
- 2. To assess the levels of existential thinking, Scale for Existential Thinking (SET) constructed by Shearer & Allan (2012) was used.
- 3. To measure meaning in life, Meaning in Life Questionnaire (MLQ) constructed by Michael F. Steger (2010) was used

PROCEDURE

To the sample of participants, instruments were administered and data collected. At the initial stage of printing the questionnaires for administration, two of the three questionnaires with default language as English were translated into Hindi language and then translated back again to English language from separate language experts proficient in respective languages to validate the Hindi translations.

The participants were orally briefed about the study along with guidelines on filling the questionnaires and were requested to give their consent for voluntary participation along with some basic personal information. Participants were also requested to fill in the details as honestly as possible to minimize any possible motivational distortion or social desirability and made aware that the result will not influence them in any way and their responses would be kept confidential. Also, they were informed that data will be collected and analysed anonymously.

They were also provided support in case of any difficulties in filling the instruments. Feedback was also taken from the subjects to determine whether they had any problems or issues with any of the items or questionnaires and whether they faced any difficulty in completing them.

ET and MLQ Inventories were provided with Hindi translation to better grasp the meaning in spite of variable language proficiencies.

ANALYSIS

The data analysis was performed on the collected data using IBM SPSS Statistics 24. Descriptive statistics were calculated including minimum score, maximum score, standard deviation, and means for all the study variables.

SPSS was used for descriptive and statistical analysis of correlations between the various variables accordingly.

Independent t-test were performed to determine the significance of difference between the two gender groups of male and female college students on the various study variables. The preliminary analysis was done to examine the strength of correlations among the study variables in SPSS.

RESULT

Table 1: Descriptive statistics of Adolescents on the variable Mental Health (with its six dimensions), Existential Thinking and Meaning in Life (with its two dimensions)

Statistical variable	Number (N)	Minimum	Maximum	Mean	Standard Deviation	
Mental Health	102	118	220	159.52	16.984	
Existential thinking	102	16	48	28.72	6.593	
Meaning in Life	102	23	67	54.32	7.327	
Search for Meaning in Life	102	13	35	28.73	4.477	
Presence of Meaning in Life	102	10	34	25.60	4.563	
Positive self-evaluation	102	25	78	32.50	5.834	
Perception of reality	102	13	30	22.11	3.024	
Integration of personality	102	17	80	32.53	7.172	
Autonomy	102	8	24	16.44	2.570	
Group-oriented attitudes	102	19	40	29.42	3.847	
Environmental mastery	102	17	36	26.52	3.559	
Age	102	17	23	17.91	1.073	

Table 2: It tabulates the Pearson correlation of all measured variables on Adolescents in the study

	MH	PSE	PR	IP	AUT NY	GOA	EM	SMIL	PMIL	MIL	ET
MH	1										
PSE	.665**	1									
PR	.446**	0.120	1								
IP	.767**	.245*	.196*	1							
AUT NY	.728**	.354**	.376**	.571**	1						
GOA	.613**	.310**	.282**	.335**	.339**	1		-			
				-							
EM	.568**	.350**	0.111	.302**	.336**	0.176	1				
SMI L	0.092	0.184	0.114	-0.030	0.129	-0.023	0.031	1			
PMI L	.305**	0.087	.285**	.243*	.442**	0.125	0.126	.314**	1		
MIL	.246*	0.167	.247*	0.133	.354**	0.064	0.098	.807**	.815**	1	
ET	0.116	-0.010	-0.055	0.070	0.175	-0.026	.378**	0.127	0.128	0.158	1

^{**}p <0.01 *p <0.05

In the above table Mental health (MH) is positively correlated as expected to all its dimensions and the Mental Health Inventory (MHI) holds good in the sample. Also Meaning in life (MIL) is positively correlated as expected to all its dimensions and the MLQ questionnaire holds good in the sample.

Overall Mental Health (MH) is not correlated to Existential Thinking (ET) and so are all the other dimensions of Mental Health (MH) five dimensions i.e. Positive self-Evaluation (PSE), Perception of Reality (PR), Integration of Personality (IP), Autonomy (AUTNY) and Group Oriented Attitudes (GOA).

Environmental Mastery (EM) is the only exception where it is positively correlated to Existential Thinking (r = 0.378 < 0.01) which is medium correlation at a significance of 0.01

Hence, the hypothesis that states that there will be significant correlation between Existential Thinking (ET) and Environmental Mastery (EM) is supported. There was no significant correlation between Existential thinking and Mental Health and its other five dimensions (with the exception of Environmental Mastery above).

Overall Mental Health (MH) is positively correlated to Meaning in Life (r = .246 < 0.05) which is medium correlation at a significance of 0.05, and so are two other dimensions of Mental Health (MH) i.e. Perception of Reality(r = .247 < 0.05) which is medium correlation at a significance of 0.05, Autonomy (r =

.354 < 0.01) which is medium correlation at a significance of 0.01 are positively correlated to Meaning in Life (MIL).

Other four dimensions of Mental Health (MH) i.e. Positive self-Evaluation (PSE), Integration of Personality (IP), Group Oriented Attitudes (GOA) and Environmental Mastery (EM) are not correlated.

Hence, there will be significant correlation between Meaning in Life (MIL) and Mental Health (MH), Perception of Reality (PR), Autonomy (AUTNY) respectively are supported.

Overall Mental Health (MH) is positively correlated to Search for Meaning in Life (r = .305 < 0.01) which is medium correlation at a significance of 0.01, and so are three other dimensions of Mental Health (MH) i.e. Perception of Reality(r = .285 < 0.01) which is medium correlation at a significance of 0.01, Integration of Personality (r = .243 < 0.05) which is medium correlation at a significance of 0.05, Autonomy (r = .442 < 0.01) which is medium correlation at a significance of 0.05 for Meaning in Life (SMIL).

Other three dimensions of Mental Health (MH) i.e. Positive self-Evaluation (PSE), Group Oriented Attitudes (GOA) and Environmental Mastery (EM) are not correlated.

Hence, there will be significant correlation between Search for Meaning in Life (SMIL) and Mental Health (MH), Perception of Reality (PR), Integration of Personality (IP), Autonomy (AUTNY) respectively are supported. Overall Mental Health (MH) is not correlated to Presence of Meaning in Life (PMIL) and so are all the other six dimensions of Mental Health (MH) i.e. Positive self-Evaluation (PSE), Perception of Reality (PR), Integration of Personality (IP), Autonomy (AUTNY), Group Oriented Attitudes (GOA) and Environmental Mastery (EM).

As per the table above Existential Thinking (ET) is not correlated to Meaning in Life (MIL) and its two dimensions i.e. Search for Meaning in Life (SMIL) and Presence of Meaning in Life (PMIL).

SUMMARY

The study explored the relationship between Mental Health, Existential Thinking and Meaning in Life among adolescents. Adolescent being a very crucial period of human development whereby meaning making process starts for the first time, thus making it a very important time when a teenager positions himself in this world as an adult. The demand to position oneself to one's existence comes naturally and the Mental Health is also under a lot of strain due to a lot of adjustment processes going on. Problem statement was to explore the relationship of Mental Health to Existential Thinking and Meaning in Life. Objective of the research was to explore the above relationship in terms of correlation, presence and gender differences if any.

No correlation indicates that Existential Thinking does not overall impact Mental Health and level of Existential Thinking may be just one of the factors contributing to mental health. At least it does not seem to predict a negative outcome in terms of mental health.

Also as Existential Thinking is a meaning making process where a person locates himself in relation to the existential issues, it is likely that such clarity about one's existence also aids in the overall capacity of an individual to feel more confident in dealing with his everyday interaction with outside environment. Environment happens to be an important part of existence and people higher on existential thinking might feel more confident with their choices and likely have a greater curiosity to understand environment and adapt to it.

IMPLICATIONS

Existential Thinking was found to influence one dimension of mental health for adolescents. This can have implications for the education system wherein a basic introduction to existential issues could be done especially to teenagers in their late teens to improve on their sense of environmental mastery, and increase in existential intelligence could be achieved. This can also have positive implications to consider and develop strategies in the long run after sufficient results and multiple future studies support the findings, to deliver well-being programs and therapeutic interventions to this segment of Indian population that is at crossroads of their life.

OPENING OF NEW VISTAS OF INTEREST

As per previous researches done in this field, existential thinking is correlated to a lot of existential variables, wellbeing, meaning in life etc. And the focus on existential thinking as a factor for growth would help further our understanding of the process of Mental Health. Since, very few studies on Existential Thinking have been conducted in India per o this type of work will add to the literature present in related fields. It is hoped that this study will further our understanding of the construct of Existential Thinking. More studied exploring broader and interconnected issues of mental well-being and existential thinking process in an age group, different from where we explored, could benefit future research in the field of mental health. Also, longitudinal data could be sought to explore the existential thinking to find how it correlates with mental health over a period of time. Especially this relation between mental health, existential thinking and meaning in life could be explored in times of life transitions, crisis situations and stress as all above variables may be fluctuating in times of distress. Experiments where direct assessment of the results of engaging in existential thinking on mental health and meaning in life can go a long way in helping us understand these significant variables in modern times where this an urgent need to deal with mental health needs (WHO, 2001). This information can be very informative for all the professionals working in the field of mental health.

